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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 10-018, 192	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51	1					
2		1					52		1				
3							53	1					
4		1					54		1				
5							55						
6		1					56		1				
7							57	1					
8		1					58		1				
9							59						
10		1					60		2				
11							61		2				
12		1					62		3				
13							63	1					
14		1					64						
15							65		2				
16		1					66		2				
17							67		2				
18		1					68		2				
19							69		2				
20		2					70		2				
21							71		2				
22		1					72		2				
23							73		2				
24		1					74		2				
25							75		2				
26		1					76		2				
27							77		2				
28		1					78		2				
29							79		2				
30		1					80		2				
31							81		2				
32		1					82						
33							83	1					
34		1					84		2				
35							85		2				
36		1					86		2				
37							87		2				
38		1					88		2				
39							89		2				
40		1					90		2				
41							91		2				
42		3					92	1					
43							93						
44		3					94		2				
45							95		2				
46		2					96		2				
47							97		2				
48		1					98		2				
49							99		2				
50		1					100		2				
TOTAL IND.							TOTAL IND.	2					
TOTAL DEP.							TOTAL DEP.	16					
TOTAL CLAIMS							TOTAL CLAIMS	18					

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET <small>(FOR USE WITH FORM PTO-875)</small>							<small>SERIAL NO.</small> 10-018, 192	<small>FILING DATE</small> 					
							<small>APPLICANT(S)</small> 						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
101		1					51		2				
102		1					52	1					
103		3					53	1					
104		3					54		6				
105		3					55		6				
106		3					56		3				
107		3					57		3				
108		3					58		3				
109		3					59		3				
110		3					60		6				
111		3					61		6				
112		3					62		3				
113		1					63		3				
114		1					64		3				
115		1					65		3				
116		1					66						
117		1					67						
118		1					68						
119		2					69						
120		1					70						
121		1					71						
122		1					72						
123		1					73						
124		1					74						
125		1					75						
126		1					76						
127		1					77						
128		1					78						
129		1					79						
130		1					80						
131		1					81						
132		8					82						
133		8					83						
134		8					84						
135		8					85						
136		8					86						
137		8					87						
138		8					88						
139		4					89						
140		4					90						
141		4					91						
142		4					92						
143		1					93						
144		1					94						
145		1					95						
146		1					96						
147		4					97						
148		4					98						
149		4					99						
150		2					100						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

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